### ATTACHMENT J

## PLACEMENT, PLACEMENT REASON AND BEHAVIORAL HEALTH CODES

To be used to describe the placement selected, the reason and the member's current Behavioral Health status for the member's Placement History.

## **PLACEMENT CODES:**

<u>Code</u>	<u>Placement</u>	
Н	HCBS - Members reside in their own home or an approved alternative residential setting. Residing in one of the approved alternative residential settings qualifies the member for an HCBS placement. Members residing in their own home must receive at least one of the following services to qualify for an HCBS placement:	
	<ul> <li>Adult Day Health</li> <li>Attendant Care</li> <li>Behavior Management</li> <li>Emergency Alert System</li> <li>Habilitation</li> <li>Home Delivered Meals</li> <li>Home Health Services</li> </ul>	<ul> <li>Homemaker</li> <li>Home Modifications</li> <li>Partial Care</li> <li>Personal Care</li> <li>Psychosocial Rehabilitation</li> <li>Respite</li> </ul>
Q	Institutionalized - Members reside in an AHCCCS registered Nursing Facility, ICF-MR, Institution for Mental Disease (IMD) or inpatient psychiatric facilities for individuals under age 21 (RTCs).	
Z	Not placed - A member must not remain in this placement for more than 30 consecutive days following ALTCS enrollment. No active services can be approved on the service plan during any "not placed" period.	

- D Acute services only Applies to members who:
  - 1. Reside in the community, do not receive any HCB services, and whose income is less than or equal to 100% of SSI; or
  - 2. Are institutionalized in uncertified facilities and whose income exceeds 100% of SSI but does not exceed 300%; or
  - 3. Reside at Toyei Nursing Home regardless of their income level.
  - 4. Reside in non-contracting alternative residential setting, refuses to move and whose income is less than or equal to 100% of SSI; or

These members can only receive Acute Care services as listed below.

Acute Care services include: Physician services, medical equipment and supplies, prescription drugs, medically necessary transportation, rehabilitation therapies (physical, speech, occupational and/or respiratory) and behavioral health services (unless the member resides in an uncertified behavioral health facility).

# PLACEMENT REASON CODES

<b>Code</b>	<u>Description</u>	
01	HCBS not appropriate or cost effective.	
02	HCBS not available in member's community.	
03	Member/authorized representative desires nursing home placement.	
04	Member voluntarily withdraws/Awaiting disenrollment.	
05	CES update not required; member in continuing institution placement with no discharge potential.	
06	HCBS recommended because cost is expected to decrease over time.	
07	HCBS - ventilator – dependent.	
08	Member hospitalized.	
10	Hospice placement; member is terminally ill.	
11	Other (Comments required).	
12	Member institutionalized in uncertified facility/or receives acute care only.	
13	HCBS is available and is most appropriate placement.	
14	Member in Assessment/Stabilization (Pima).	
23	Logical delete.	

#### BEHAVIORAL HEALTH CODES

### **Code Description**

A. **Psychotropic Medications only.** Includes only medications used to modify behavioral health symptoms.

Medication monitoring by the prescribing physician is not considered a separate service so if the member receives no other Behavioral Health "services", s/he would be included in this category.

B. **Behavioral Health services only.** This category would apply to members who receive any Behavioral Health services but who take no psychotropic medications.

Does not include members who have only received a Behavioral Health evaluation but do not receive on-going Behavioral Health services.

- C. **Behavioral Health services and Psychotropic medications.** See A and B above. Includes members receiving psychotropic medication monitoring by a nurse.
- D. **Behavioral Health Placement without Psychotropic medications.** Includes Residential Treatment Centers (RTC), Level II or III Behavioral Health facilities and alternative residential settings that specialize in Behavioral Health. Also includes Behavioral Health units within nursing facilities but excludes Wandering/Dementia units in nursing facilities.
- E. **Behavioral Health Placement with Psychotropic medications.** See A and D above.
- F. No Behavioral Health Needs.

The following are appropriate combinations of Placement, Residence and Behavioral Health codes:

PLACEMENT	RESIDENCE	BEHAVIORAL HEALTH
Н	8, F, K, L, R	D or E
Н	5, 6, 9, B, E, G	A - F
Н	1, P	A – C, F
Q	2, 4	A - F
Q	W	A - C and $F$
Q	7, C, J	D or E
D	1, 2	A – C, F
Z	1	F